PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/005,878			ing Date 07/2001	To be Mailed		
APPLICATION AS FILED – PART I (Column 1) (Column 2)								SMALL ENTITY 🛛			OTHER THAN OR SMALL ENTITY		
⊢	FOR		NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	<u> </u>	RATE (\$)	FEE (\$)		
	BASIC FEE (37 CFR 1.16(a), (b),	\neg	N/A		N/A	ı	N/A	122(0)	l	N/A	1 (0)		
	SEARCH FEE		N/A		N/A	1	N/A		ı	N/A			
	(37 CFR 1.16(k), (j), (EXAMINATION FE (37 CFR 1.16(o), (p), (p)	E	N/A		N/A	ı	N/A		1	N/A			
	TAL CLAIMS CFR 1.16(i))		minus 20 = *				x \$ =		OR	x s =			
IND	EPENDENT CLAIM CFR 1,16(h))	s	minus 3 = *			ı	x \$ =			x \$ =			
	APPLICATION SIZE 37 CFR 1.16(s))	FEE shee is \$2 addit	If the specification and drawing sheets of paper, the application is \$250 (\$125 for small entity) the additional 50 sheets or fraction 35 U.S.C. 41(a)(1)(G) and 37 (G)		n size fee due for each n thereof. See								
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(j))													
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		ı	TOTAL	L		
APPLICATION AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY													
AMENDMENT	11/09/2006	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)		
	Total (37 CFR 1.16())	· 17	Minus	 20	= 0		X \$25 =	0	OR	x s =			
	Independent (37 CFR 1.16(h))	• 2	Minus	 -3	= 0	ı	X \$100 =	0	OR	x s =			
	Application Size Fee (37 CFR 1.16(s))												
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR				
						•	TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE			
(Column 1) (Column 2) (Column 3)													
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)		
	Total (37 CFR 1,16(i))		Minus		-		x \$ =		OR	x \$ =			
M	Independent (37 CFR 1.16(h))		Minus	***	:		x \$ =		OR	x \$ =			
ä	Application Size Fee (37 CFR 1.16(s))]			l				
ΑM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR				
1							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE			
If the entry in column 1 is less than the entry in column 2, write 0" in column 3. Legal Instrument Examiner: "If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "20". "If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3". The "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3". The "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3".													

This collection of information is equated by 37 CER 1.10. The information is required to obtain or retain a benefit by the public which is in life (and by the USETO to concess) an implication. Confidentially is governed by 85 USE v. 22 and 37 CER 1.4. If this collection is estimated to state 2 relativeste to complete in excluding patternity, preparing, and submitting the completed application form to the USETO. Time will very depending upon the individual case. Any comments on the amount of time you require to complete this form and/or segeocomes for reducing this burford, subsuld be sent to the CEMPT (information Officer, U.S. Patterni and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandrius, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO C. Commissioner for Patternity, P.O. Box 1450, Alexandrius, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO C. Commissioner for Patternity, P.O. Box 1450, Alexandrius, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO C. Commissioner for Patternity, P.O. Box 1450, Alexandrius, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO C. Commissioner for Patternity, P.O. Box 1450, Alexandrius, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO C. Commissioner for Patternity and Commissioner for Patternity and